

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OKLAHOMA

FILED
SEP 15 2009

Phil Lombardi, Clerk
U.S. DISTRICT COURT

ROCKLAND D. JOHNSON
Plaintiff/Petitioner

vs.

Case Number: 04-CV-724-JHP-PJC

MARTY SIMMONS, WARDEN
Defendant(s)/Respondent(s)

APPLICATION TO PROCEED WITHOUT PREPAYMENT OF FEES AND AFFIDAVIT

I, ROCKLAND D. JOHNSON declare that I am the (check appropriate box)

☒ petitioner/plaintiff/movant ☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration. DAVIS CORRECTIONAL FACILITY

Are you employed at the institution? NO Do you receive any payment from the institution? YES

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer. N/A

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

NEVER EMPLOYED

3. In the past 12 twelve months have you received any money from any of the following sources?

a. Business, profession or other self-employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Rent payments, interest or dividends	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Pensions, annuities or life insurance payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Disability or workers compensation payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Gifts or inheritances	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
f. Any other sources	<input type="checkbox"/> Yes	<input type="checkbox"/> No

No Orig Sign ☐
 No Env ☐
 O/MJ ☐
 C/Ret'd ☐
 No Env/Cpys ☐
 C/MJ ☒
 No Cert Svc ☐
 Mail ☒

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

4. Do you have **any** cash or checking or savings accounts? ☒ Yes ☐ No

If "Yes," state the total amount. \$83.00 (PRISON SAVINGS)

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☐ Yes ☒ No

If "Yes," describe the property and state its value.

N/A
GIFTS \$20.00 AVERAGE A MONTH FROM FAMILY
FOR COMMISSARY.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

I AM INCARCERATED

I declare under penalty of perjury that the above information is true and correct.

9-10-09

Date

Rockland D. Johnson

Signature of Applicant

NOTICE TO PRISONER: In addition to the foregoing statement of all assets, a prisoner seeking to proceed without prepayment of fees shall submit the attached "Statement of Institutional Accounts," completed and signed by an appropriate institutional officer. A prisoner is also required to attach a ledger sheet for each institutional account showing all receipts, expenditures, and balances for the last 6-month period.

STATEMENT OF INSTITUTIONAL ACCOUNTS

I hereby state that on 8th day of September, 20 09 this prisoner had \$.19¢
in his/her draw account and \$ 89.00 in his/her savings account.

A ledger sheet for this prisoner's trust account (or institutional equivalent) for the preceding six month period, or for the entire period of confinement if less than six months, is attached.

9/8/09

Date

Risa Lewis

Authorized Prison Official

Accounting Clerk

Title

ACCOUNT STATEMENT from 3/8/2009 to 9/8/2009

JOHNSON, ROCKLAND DEJERIO

Agency #: 419056
CCA #: 1073090
HOUSING: E/EA/228/A

Account 1:	\$	0.19
Escrow Account:	\$	0.00
Cost Recovery Owed:	\$	0.00

Current Balance Information

Account 1 Transactions

Transaction Date	From	Transaction Code	Amount	Balance	Note
BALANCE AT BEGINNING OF DATE RANGE - 3/8/2009				0.30	
03/12/2009		JN Deposit	8.00	8.30	FEBRUARY WAGES
03/13/2009	COMMISSARY PURCHASE	CO Withdrawal	-6.92	1.38	COMMISSARY SUMMARY POSTING
03/20/2009	COMMISSARY PURCHASE	CO Withdrawal	-1.24	0.14	COMMISSARY SUMMARY POSTING
04/06/2009		WI Deposit	25.00	25.14	DEBRA PEEPLES
04/10/2009	COMMISSARY PURCHASE	CO Withdrawal	-22.45	2.69	COMMISSARY SUMMARY POSTING
04/13/2009	COMMISSARY REVERSAL	CRV Withdrawal	1.00	3.69	COMMISSARY SUMMARY REVERSAL
04/16/2009		JN Deposit	8.00	11.69	Inmate Wages March 09
04/17/2009	COMMISSARY PURCHASE	CO Withdrawal	-6.64	5.05	COMMISSARY SUMMARY POSTING
04/24/2009	COMMISSARY PURCHASE	CO Withdrawal	-3.29	1.76	COMMISSARY SUMMARY POSTING
05/08/2009	COMMISSARY PURCHASE	CO Withdrawal	-1.64	0.12	COMMISSARY SUMMARY POSTING
05/14/2009		JN Deposit	8.00	8.12	April 2009 Inmate Wages
05/15/2009	COMMISSARY PURCHASE	CO Withdrawal	-3.29	4.83	COMMISSARY SUMMARY POSTING
05/22/2009	COMMISSARY PURCHASE	CO Withdrawal	-4.57	0.26	COMMISSARY SUMMARY POSTING
06/08/2009		WI Deposit	20.00	20.26	DEBRA PEEPLES
06/11/2009		JN Deposit	8.00	28.26	May 2009 Wages
06/12/2009	COMMISSARY PURCHASE	CO Withdrawal	-27.37	0.89	COMMISSARY SUMMARY POSTING
06/26/2009	COMMISSARY PURCHASE	CO Withdrawal	-0.44	0.45	COMMISSARY SUMMARY POSTING
07/16/2009		JN Deposit	8.00	8.45	June 2009 Inmate Wages
07/17/2009		MD Withdrawal	-4.00	4.45	MEDICAL 7-10-09
07/17/2009	COMMISSARY PURCHASE	CO Withdrawal	-3.28	1.17	COMMISSARY SUMMARY POSTING
07/24/2009		WI Deposit	10.00	11.17	DEBRA PEEPLES
07/24/2009	COMMISSARY PURCHASE	CO Withdrawal	-10.74	0.43	COMMISSARY SUMMARY POSTING
08/13/2009		JN Deposit	8.00	8.43	July 2009 Inmate Wages
08/14/2009	COMMISSARY PURCHASE	CO Withdrawal	-6.93	1.50	COMMISSARY SUMMARY POSTING
08/27/2009	COMMISSARY PURCHASE	CO Withdrawal	-1.31	0.19	COMMISSARY SUMMARY POSTING
SUMMARY OF TRANSACTIONS (3/8/2009-9/8/2009)			-0.11		
				0.19	Ending Balance

Date\Time: 9/9/2009 7:20:26 AM

Institution: ADM

ODOC

Verified: _____

Offender Statement Report

Offender#	Offender/Group Name	Institution	Unit	Cell/Bed
0419056	JOHNSON, ROCKLAND	ADM	UNIT E	UNIT E-A

Transaction List

Transaction Date	Transaction Type	Source Document #	Receipt# / Check#	Amount	Account Balance
05/01/2009	BEGINNING BALANCE				\$0.00
05/04/2009	CONVERSION	Conversion	9	\$83.00	\$83.00
06/24/2009	PRIVATE PRISON SAVINGS	DCF APRIL 2009	10304	\$2.00	\$85.00
06/24/2009	PRIVATE PRISON SAVINGS	DCF MAY 2009	10306	\$2.00	\$87.00
07/28/2009	PRIVATE PRISON SAVINGS	DCF JUNE 2009	22507	\$2.00	\$89.00

Summary Balances

Available Balance	Savings Balance	Debt Encumbrance	Other Encumbrance	Outstanding Instruments	Administrative Holds	Account Balance
\$0.00	\$89.00	\$0.00	\$0.00	\$0.00	\$0.00	\$89.00